Indiana Criminal Justice Institute – Victim Services Division
Office for Victims of Crime – VOCA Grant Program
2011 Grant Review Form

Type of Application: _____ Continuation _____ New

Applicant: _____

Project Title: _____

Current Funding: $_____   **Requested Funding**: $_____   **Funding Recommended**: $_____

County(s) Served: _____

Scoring Summary Sheet

	Points Available	**Score Received**
Funding Application Checklist	5 Points	_____
Section One (A-O)	10 Points	_____
Section Two (P-U)	**Narratives**	
P. Introduction & Agency Overview	15 Points	_____
Q. Victim Compensation	10 Points	_____
R. Status of Current Program or New Program	15 Points	_____
S. Use of Volunteers	10 Points	_____
T. Budget Narrative	25 Points	_____
Section Three	**Exhibits**	
A1. Proposal Abstract	20 Points	_____
A2. Goals and Objectives	20 Points	_____
B. Program Detail Budget	15 Points	_____
C. Program Need & Implementation	35 Points	_____
Section Four	**Attachments**	
1. Current Funding	5 Points	_____
2. Letters of Support	5 Points	_____
3. Certifications and Assurances	5 Points	_____
4. Grant Compliance	5 Points	_____
Total Points Awarded		_____
	Score/200 =	_____

Funding Application Checklist – 5 Points Max

Did the applicant complete and sign the Funding Application Checklist?
> Yes: 5
> No: 0

Total _____

Section One (A-O) – 10 Points Max

Were all blanks for Section One completed?
> Yes: 1
> No: 0

Did the applicant choose a purpose area for Letter G?
> Yes: 1 ½
> No: 0

Did the percentages given for Letter H total 100%?
> Yes: 1 ½
> No: 0

Does the program use an evaluation tool?
> Yes: ½
> No: 0

Did the applicant identify how many victims they served in the last 12 months?
> Yes: ½
> No: 0

Did the applicant identify how many years they have been receiving VOCA funds from ICJI?
> Yes: 1
> No: 0

Is the applicant registered and in good standing with the Indiana Secretary of State Office?
> Yes: 1
> No: 0
> N/A (Governmental Agencies Only): 1

Does the applicant have a policy/procedures manual?
> Yes: 1
> No: 0

Did the applicant list who was involved in writing the funding request application?
> Yes: 1
> No: 0

Did the applicant provide the information requested for letter O?
> Yes: 1
> No: 0

Total _____

Section Two (P-U) Narratives

*P. Introduction & Agency Overview – **15 Points Max***

1. Did the applicant limit this section to three pages, use 12-point font and double space?
   Yes: 1
   No: 0
2. Did the applicant describe the function of the agency/organization?
   Yes: 2
   No: 0
3. Did the applicant explain how the program impacts the agency/organization?
   Yes: 2
   No: 0
4. Did the applicant explain how the program impacts the community?
   Yes: 2
   No: 0
5. If the applicant requested an increase in funding, is the need explained?
   Yes or NA: 2
   No: 0
6. Did the applicant identify how the program will function if less funding than was requested is received?
   Yes: 3
   No: 0
7. Did the applicant identify how the program will function is no funding is received?
   Yes: 3
   No: 0
   Partial: 1 – 2

   Total _____

*Q. Victim Compensation – **10 Points Max***

1. Did the applicant describe how their program assists with Victim Compensation?
   Yes: 10
   Partial: 1 - 9
   No: 0

   Total _____

*R. Status of Current Program or New Program – **15 Points Max***

   Please select R1 if this is a Continuation Program or select R2 if this is a New Program.

R1. Status of Current Program
1. Did the applicant limit this section to two pages, use 12-point font and double space?
   Yes: 1
   No: 0
2. Did the applicant give an overview of how the program has met its objectives and resulting impact during the past grant period?
   Yes: 6
   Partial: 1 – 5
   No: 0

3. Did the applicant explain issues that prevented the successful completion of Performance Measures set for 2010/2011 funding?
   Yes: 8
   Partial: 1 – 7
   No: 0   **Total _____**

R2. New Program
1. Did the applicant limit this section to two pages, use 12-point font and double space?
   Yes: 1
   No: 0
2. Did the applicant provide details of non-federal dollars the agency is currently receiving in support of this program?
   Yes: 2
   No: 0
3. Did the applicant indicate the number of years the agency has been in existence?
   Yes: 2
   No: 0
4. Did the applicant explain if the program has been done with this agency before?
   Yes: 2
   No: 0
5. Did the applicant explain if the program was established due to a recognized need in the community or to fill a gap in service? If so, did the applicant identify the need?
   Yes: 8
   No: 0
   Partial: 1 – 7
                                                                                            Total _____

S. Use of Volunteers – *10 Points Max*

If volunteers are utilized…
1. Did the applicant limit this section to one page, use 12-point font and double space?
   Yes: 1
   No: 0
2. Did the applicant describe how their program is currently using volunteers?
   Yes: 3
   No: 0

3. Did the applicant describe how the program's volunteers will continue to be used?
   Yes: 2
   No: 0
4. Did the applicant describe how volunteers are recruited, screened, and trained?
   Yes: 4
   No: 0   **Total _____**

If volunteers are **not** utilized…
1. Did the applicant limit this section to one page, use 12-point font and double space?
   Yes: 1
   No: 0

2. Did the applicant list the number of years they have received VOCA funds and why they are not currently utilizing volunteers?
   Yes: 3
   No: 0
3. Did the applicant include the "Volunteer Waiver" form from the website with an explanation as to why volunteers are not utilized?
   Yes: 6
   No: 0

Total _____

T. *Budget Narrative – **25 Points Max***

1. **PERSONNEL** and **FRINGE BENEFITS** (If no Personnel or Fringe Benefits items are listed in the budget, give **7** points and skip to Contractual Services)
   a. Did the applicant describe the roles & responsibilities for each position or attach a job description?
      Yes: 1
      No: 0
   b. Did the applicant describe the direct service each position provides victims?
      Yes: 1
      No: 0
   c. Did the applicant explain how the administrative duties of each position directly impacts victim services and what percentage of time is spent on providing direct services?
      Yes: 1
      No: 0
   d. Did the applicant state if the position receives funding from any other sources? If so, did the applicant list each source and the amount?
      Yes: 1
      No: 0
   e. Did the applicant give a break down of Personnel costs for each position in the budget including the number of anticipated hours worked per year and the rate of pay per position?
      Yes: 1
      No: 0
   f. Did the applicant state if this is a new position(s) and/or why the position is needed?
      Yes: 1
      No: 0
   g. Did the applicant describe fringe benefits for each position?
      Yes: 1
      No: 0
      NA: 1 (if no fringe benefits are listed, give one point)

Total _____

2. **CONTRACTUAL SERVICES** (If no Contractual Services are listed in the budget, give **5** points and skip to Travel)
   a. Does the applicant describe the position or services being contracted?
      Yes: 1
      No: 0
   b. Does the applicant describe how the service(s) directly impact victims?
      Yes: 1
      No: 0

    c. Is the consultant's hourly rate provided?
       Yes: 1
       No: 0
    d. Does the applicant describe the basis for selection of the consultant?
       Yes: 1
       No: 0
    e. Does the applicant explain if this is a new or continued contract? If it is new, why is it needed?
       Yes: 1
       No: 0   **Total _____**

3. **TRAVEL** (If no Travel is listed in the budget, give *2* points and skip to Equipment)
    a. Did the applicant describe why travel is necessary to provide direct victim services?
       Yes: 1
       No: 0
    b. Does the applicant explain the need for more than one person to travel if two or more persons are traveling together?
       Yes: 1
       No: 0   **Total _____**

4. **EQUIPMENT** (If no Equipment is listed in the budget, give *5* points and skip to Operating Expenses/Supplies)
    a. Does the applicant explain why the agency needs this equipment?
       Yes: 1
       No: 0
    b. Does the applicant explain if the agency currently has this equipment and/or why new equipment is needed?
       Yes: 1
       No: 0
    c. Does the applicant explain how purchasing this equipment will improve services to victims?
       Yes: 1
       No: 0
    d. If more than one piece of equipment is requested, did the applicant prioritize the items?
       Yes: 1
       No: 0
    e. Does the applicant explain if the equipment is available in a cooperative effort with other service providers or agencies?
       Yes: 1
       No: 0   **Total _____**

5. **OPERATING EXPENSES/SUPPLIES** (If no Operating Expenses/Supplies are listed in the budget, give **3** points)
    a. Did the applicant explain how the expenditure will directly improve services to victims?
       Yes: 1
       No: 0
    b. Does the applicant state if non-VOCA funded personnel will be using or have access to these items? If non-VOCA personnel use the items, does the applicant explain why?
       Yes: 1
       No: 0

  c. Does the applicant state what percentage of these items will be covered by VOCA funds? If the calculation is 100%, did the applicant provide an explanation why?

    Yes: 1

    No: 0

<div align="right">Total _____</div>

6. **Overall Budget:**

  a. Did the applicant limit this section to five pages, use 12-point font and double space?

    Yes: 1

    No: 0

  b. Taking into consideration the overall budget narrative, did the applicant include explanation of all line items listed in the Program Detail Budget in Exhibit B?

    Yes: 2

    No: 0   **Total _____**

<div align="center">Budget Narrative Total _____</div>

Section 3 – Exhibits

Exhibit A – Project Narratives

 *Proposal Abstract – **20 Points Max***

1. Did the applicant limit this section to one page, use 12-point font and double space?

 Yes: 1

 No: 0

2. Did the applicant provide a clear, concise abstract with an accurate description the program?

 Yes: 9 ½

 No: 0

 Partial: 1 – 9

3. Did the abstract describe the design, implementation and expected outcomes/impact of the program?

 Yes: 9 ½

 No: 0

 Partial: 1 – 9   **Total _____**

 *Goals and Objectives– **20 Points Max***

1. Did the applicant limit this section to two pages, use 12-point font and double space?

 Yes: 1

 No: 0

2. Did the applicant include at least one, but no more than three goals, with objectives for each goal

 Yes: 1

 No: 0

3. Are the goals and objectives reasonably attainable, given the time frame and resources available?

 Yes: 3

 No: 0

4. Did the applicant identify the following, (may also refer to applicant's responses to question G in Section 1):

  a. Goal(s) that relate to the purpose of the VOCA funding and needs of the community as described in the Proposal Abstract?

   Yes: 3

   No: 0

<div align="center">7</div>

    b. At least one measurable objective for each goal that describes **what** will be done? (Consider whether or not a change will occur as a result of this project.)
       Yes: 3
       No: 0
    c. At least one measurable objective for each goal that describes **how** it will be done? (Consider whether or not individuals/organizations responsible for carrying out the duties are identified).
       Yes: 3
       No: 0
    d. At least one measurable objective for each goal that describes **when** it will be done?
       Yes: 3
       No: 0
    e. At least one measurable objective for each goal that describes **how** the results will be measured to assess the project at the end of each quarter and at the end of the project period?
       Yes: 3
       No: 0

Total _____

*Exhibit B – Program Detail Budget – **15 Points Max***
1. Did the applicant attach the entire Program Detail Budget, including the Budget Match page and are computations correct?
Yes, the computations are correct and all sections are completed: 15
Computations are correct, but not all sections are completed: 7
All section are completed, but computations are not all correct: 7
No: 0   **Total** _____

*Exhibit C – Program Need and Implementation – **35 Points Max***
1. Program Need
    a. Did the applicant limit this section to five pages, use 12-point font and double space?
       Yes: 1
       No: 0
    b. Did the applicant identify the target population?
       Yes: 3
       No: 0
    c. Did the applicant give details of how the target population will benefit from the program?
       Yes: 3
       No: 0
    d. Did the applicant establish how the need is specific to the community being served and include a demographic profile of the target population in each county, city, town or region to be served?
       Yes: 2
       No: 0
    e. Did the applicant describe the community in which the program would, or is currently being implemented?
       Yes: 2
       No: 0
    f. Did the applicant identify how the program will address the needs of underserved populations?
       Yes: 3
       No: 0

g. Did the applicant answer the question regarding any associations the program may have with Faith Based Initiative?
Yes: 3
No: 0   **Total _____**

2. Program Implementation
   a. Did the applicant identify the agency(s) and/or officer(s) responsible for implementing the program?
   Yes: 3
   No: 0
   b. Did the applicant describe any collaborative relationships to be developed or enhanced to improve the programs mission?
   Yes: 6
   Partial: 1 - 5
   No: 0
   c. Did the applicant identify the roles and responsibilities of each program partner?
   Yes: 3
   No: 0
   d. Did the applicant identify any program or organizations in the area that provide direct services to victims?
   Yes: 3
   No: 0

   e. Did the applicant explain if any services were being duplicated in their area and include a list of those services?
   Yes: 3
   No: 0   **Total _____**

                                        Program Need & Implementation Total _____

Section 4 – Attachments

Attachment 1 – Current Funding

Did the applicant provide the following information in a folder marked "Attachment 1 – Confidential" in both the "original" AND all four copies of the application?
Yes: 5
No: 0
- A list of all active Federal grants (including the amount) already supporting this or related efforts?
- Information on all pending applications for Federal dollars for this or related efforts?
- A list of all active State grants (including the amount) that support the program?
- A list of all active foundation or philanthropic grants that support the program?
- A list of all fundraising activities supporting the program?
- A list of any and all local or regional funding the supports the program?
- ***Non-Profits Only***: A Total Agency Budget?
                                                                                                        Total _____

Attachment 2 – Letters of Support

Did the applicant attach two letters of support? At least one letter must be from a Judge/Court, Prosecutors Office, Law Enforcement Agency or other victim service provider.
Letters are included as required, dated in 2011 and specific to the application: 5
Letters are provided, but not as described above: 1
 No letters included: 0   **Total _____**

Attachment 3 – Certifications & Assurances

Did the applicant print and sign the Certifications & Assurances?
Yes: 5
No: 0   **Total _____**

Based on previous experience with STOP/VOCA Grants, has the applicant demonstrated its ability to comply with grant management requirements?
Organization is consistently on-time and consistently accurate in reporting with no history of excessive de-obligations: 5
Organization has occasional issues with report timeliness or accuracy: 3
Organization is consistently late in reporting and has difficulty complying with requests for information: 0

Total _____

Please transfer the total for each area to the corresponding blanks on the Summary Page.

Please add all the numbers and fill in the "Total Points Awarded" line.

Finally, take the Total Points Awarded and divide the number by 200 to determine their percentage.